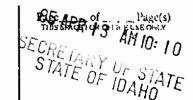
## LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By: LOUBYISTS (Sec. 67-6619)



(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent busin	ness address	Date p	Date prepared Period o				covered			
Donna M. Jones			year ending							
Idaho Real Estate Commi	ŀ	04/13/2005			(Day)	(Yr.)				
PO Box 83720				(Me) 12	31	2005				
Boise. ID 83720-0077	No super Adverse and a	- i a aura de la Tal		1		<u> </u>		<u> </u>		
<u> </u>	ble expenditures made of				·					
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	Item 3, at botte	arounts contributed by each employer (Identify employers, under om of page.)								
Do Not Have to be Reported	All Employers	Employer N	on E	mployer No. 2	Employer No. 3		Eingloyer No. 4			
Entertainment Food and Refreshment	\$	\$	\$		. \$		\$			
Living Accommodations								<del></del>		
Advertising										
Travel										
Telephone										
Other Expenses or Services			_							
Total	\$	s	0.00	0.00	\$	0.00	s	0.00		
*When the number of employe	Is you are reporting for requ	ires multiple L-2 (	erms to be fi	led a total amount fo	 or all employers s	should he en	tered on Pa	ige l		
tem The totals of each exper	diture of more than fifty Place		a legislato. Amount		of Legislators &		i de in Can			
	31000		111,000.11	1447100	er Er grandia de	I didic come				
				· .						
ļ				İ			12			
				1						
Continued on attached page(	<b>'</b> s)	}		l						
INS	TRUCTIONS	Item 3	E	Employer(s) Name(s) and Address(cs)						
			wa Ida	aho Real Esta	te Commiss	sion				
Who should file this form: 67-6617 Idaho Code.		PO Box 83720, Boise, ID 83720-0077								
Filing deadline: Annual re	No.2	No.2								
TO BEFILED WITH:										
	Ben Ysursa cretary of State	No.3	No 3							
Se F		No.4								
Hois Phone: (208) 33	No.4									

liem 4	Exper	endinures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible could property to any Legislator, or for or on behalf of any legislator.										
	Date Amount				Name of Legislator Receiving or Benefited							
	none		none									
liem S				ion, the number of the Senste r legislative activity in which		LEGISLATIVE SUD	DECT	IDENTIFICATION				
3	the L	opphir: A	um ambbouting of o	pposing.	Code	Subject	Code	Subject				
Subject	Code	Dill, R	esolution or Other	Appropriation Bill Number	CI	Agriculture, horticulture,	17	Health service, medicine, drugs				
_(from	table)	Legislat	ive Ident, Number	and Section Number	02	farming, and livestock Amusements, games, athletics		and controlled substances, health insurance, hospitals				
16/1	10	,	SB1008		1 "	and sports	18	Higher education				
10/1	10		SB1009		03	Danking, finance, credit and	19	Housing, construction, codes				
			_		04	bides with an anoth	20	Insurance (excluding health				
		,	SB1010		\ \frac{1}{2}	Children, minors, youth,	21	insurance) Labor, salaries and wages,				
					Q5	Church and religion		collective bargaining				
					06	Consumer affuirs	22	Law enforcement, courts,				
			:		07	l'cology, environment, pollution, conservation, zoning, land and	23	judges, trimes, prisons License, permits				
					l	welet use	24	Liquor				
					อุล	Fiducation	25	Manufacturing, distribution and				
					69	Elections, campaigns, voting,		services				
					10	political parties Equal rights, civil rights,	26	Natural resources, forest and forest products, fisheries, mining				
					'"	minority affairs		and mining products				
		Ì			11	Covernment, financing.	27	Public lands, parks, recreation				
					1	ta tation, revenue, budget,	28	Social insurance, unemployment				
					12	appropriations, bids, fees, funds Government, county		insurance, public assistance, workmen's compensation				
					13	Government, federal	29	Transportation, highways,				
			,		14	Government, municipal		streets and roads				
					15	Government, special districts	30	Utilities, communications.				
				1 10	Government, state		televisions, radio, newspaper, power, CATV, gas					
		1			1		31	Other (please specify)				
					1							
		Į			؍ ا		// P	26 - 1 3/(3/				
		Ì		}	سيسل	Maria C	-	XX				
		i			Ī	Lobbyist signature	- K	Date				
		l				11.	6	4/13/				
		l			1	Mann /	χ	1/10/6				
						Employer No. 1 signature		Date				
						Laplayer No. 2 signature		Date				
				s above is a true, complete and		temployer No. 3 signature		Date				
	PUNCTAC	TO 10 300	oruence with Soction	og 67-6624 Idaha Code.	]	Employer No. 4 signature		Date				